

June 25, 2010
Kentucky Board of Dentistry
Legislative Committee Meeting

Draft Regulation: Dental practices

Dr. McKee made a motion to approve the Dental practices section of the proposed regulations as amended today and to include the CDC Guidelines as incorporated by reference. Dr. King seconded the motion. All were in favor; none opposed.

Voting Committee members present were:

Kentucky Board of Dentistry
William Boggess, DMD
Susan King, DMD

Kentucky Dental Association
John L. Creech, DMD
Mike Johnson, DMD
Kevin Wall, DMD

Kentucky Dental Hygienist's Association
Donna Ruley, RDH
Donna Fogle, RDH

Kentucky Department for Public Health
Julie McKee, DMD

University of Kentucky College of Dentistry
Fonda Robinson, DMD

Dental practices.

RELATES TO:

STATUTORY AUTHORITY:

NECESSITY, FUNCTION, AND CONFORMITY: KRS XXX.XXX requires the board to promulgate administrative regulations relating to dental practices which shall include minimal requirements for documentation, Centers for Disease Control compliance, conscious sedation of patients, compliance with federal controlled substance regulations, and any applicable federal statute or regulation.

Section 1. Minimum Documentation Standards for all Dental Patients.

- (1) All patient records shall be kept by the dentist for a minimum of seven (7) years from the date of the last treatment or two (2) years following the patient's death.
- (2) Every dentist shall comply with KRS 422.317 regarding patient records.
- (3) Each patient record for a dental patient in the Commonwealth shall include at a minimum:
 - (a) the patient's name;
 - (b) the patient's date of birth;
 - (c) the patient's medical history;
 - (d) the patient's dental history;
 - (e) the patient's current medications from all healthcare providers;
 - (d) the date of current treatment;
 - (e) the diagnosis;
 - (f) the treatment plan;
 - (g) the treatment options presented to the patient;
 - (e) the tooth number, surfaces, or areas to be treated;
 - (f) the material used in treatment;
 - (g) local or general anesthetic used, the type, and the amount;
 - (k) post-anesthesia instructions given;
 - (h) sleep or sedation dentistry medications used, the type, and the amount; and
 - (m) post-sleep or post-sedation dentistry instructions given; and
 - (i) a complete list of prescriptions provided to the patient, the amount given, and the number of refills indicated.

Section 2. All dental practices in the Commonwealth of Kentucky shall adhere to the following CDC guidelines for Infection Control.

- (1) A Kentucky Board of Dentistry Dental Practice Infection Control Checklist shall be incorporated by reference and shall contain the following items:
 - (a) Education of new employees in the office procedures for infection control;
 - (b) — A required annual update for all employees;
 - (c) — Proof of all workers involved in patient treatment of either having received a Hepatitis B Vaccinations or signed a waiver;
 - (d) — Medical compliance records on all staff members which shall include at a minimum immunization records and documentation of test received as a result of occupational exposure;
 - (e) — Proof of a policy related to all staff involved in clinical patient care wear a fresh set of gloves for each patient;
 - (f) — Proof of a policy related to all staff changing gloves between patients;
 - (g) — Proof of a policy related to all staff wearing protective clothing during patient care;
 - (h) — Proof of a policy related to all staff wearing mask when procedures involve spatter;
 - (i) — Proof of the necessary supplies to comply with the aforementioned policies;
 - (j) — Proof of hand pieces being sterilized following each patient treatment by one of the following means:
 - a. — Autoclave;
 - b. — Dry Heat or;

- e. — Heat/Chemical Vapor
- (k) — Proof of routine verification that sterilization methods are functioning properly;
- (l) — Proof that individual burs are either discarded or sterilized following each use;
- (m) — Proof of a policy which addresses the disinfection of all operatory equipment and surfaces between patients;
- (n) — Proof that all surfaces that are difficult to disinfect are covered with a non-penetrable barrier;
- (o) — Proof of a policy that all non-penetrable surfaces are changed between patients;
- (p) — Documentation of the name and type of disinfectant used;
- (q) — Proof of a policy which describes a separate place for the cleaning, disinfecting, and sterilization of items.
- (r) — Proof of a policy which provides for the protection of dental records, charts, and radiographs from biohazards while those items are in the patient treatment area;
- (s) — Copy of a contract or other documentation providing with whom you have a medical waste management program;
- (t) — Proof of a policy which details how you dispose of biohazardous material including instruments, sharps, and extracted teeth;
- (2) Any dentist who is found deficient upon initial CDC inspection shall be granted have thirty (30) days to be in compliance with the guidelines and submit a written plan of correction to the board. thirty (30) days to become compliant and The dentist may then receive a second inspection after the thirty (30) days have passed. If the dentist fails the second inspection they shall be immediately temporarily suspended until proof of compliance is provided to the board and they shall pay the fine as prescribed in XXX KAR XXX.XXX. submit a written plan of correction to the board, pay the fine as prescribed in XXX KAR XXX.XXX, and provide proof of compliance within the next thirty days.

Section 3. Mild Sedation, Moderate Sedation, Deep Sedation and General Anesthesia.

Section 4. Prescription writing.

Section 3. Termination of a Patient-Doctor Relationship. In order for a licensed dentist to terminate the patient-doctor relationship, the dentist shall:

- (1) Provide written notice to the patient of the termination;
- (2) Provide emergency treatment for the patient for thirty (30) days from the date of termination; and
- (3) Retain a copy of the letter of termination in the patient records.